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**POWER OF ATTORNEY OR
REVOCATION OF POWER OF ATTORNEY
WITH A NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

| | |
|------------------------|---|
| App. No. | 10/617,949 |
| Filing Date | 7/10/03 |
| First Named Inventor | D. Lynn Kirkpatrick |
| Title | Assymetric Disulfides and Methods of Using Same |
| Art Unit | 1617 |
| Examiner Name | Shobha Kantamneni |
| Attorney Docket Number | 34395-725.501/Conf. No.4473 |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

021971

OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

| Practitioner(s) Name | Registration Number |
|----------------------|---------------------|
| | |
| | |
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Please recognize or change the correspondence address for the above-identified application to:

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OR

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| <input type="checkbox"/> Firm or Individual Name | | | |
| Address | | | |
| City | State | Zip | |
| Country | | | |
| Telephone | Email | | |

I am the:


☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|--|-----------|---------|
| Signature |  | Date | 7/15/03 |
| Name | Robert L. Kirkman, M.D. | Telephone | |
| Title and Company | President and CEO for and on behalf of Prolix Pharmaceuticals Corp., a wholly-owned subsidiary of Oncothyreon Inc. | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: D. Lynn KirkpatrickApplication No./Patent No.: 10/617,949 Filed/Issue Date: 7/10/03Entitled: Asymmetric Disulfides and Methods of Using SameProlox Pharmaceuticals Corporation, a Pennsylvania corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is the assignee of the entire right, title, and interest in;

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
- OR
- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: Prolox Pharmaceuticals, Inc. To: Prolox Pharmaceuticals Corp.

The document was recorded in the United States Patent and Trademark Office at

Reel 021604, Frame 0805, or for which a copy thereof is attached.D. Lynn Kirkpatrick2. From: Garth Powis To: Prolox Pharmaceuticals, Inc.

The document was recorded in the United States Patent and Trademark Office at

Reel 014878, Frame 0426, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at

Reel _____ Frame _____ or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet(s).

☐ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

Date

President and CEO for and on behalf of
Prolox Pharmaceuticals Corp., a wholly-
owned subsidiary of Oncothyreon Inc.

Title

Robert L. Kirkman, M.D.

Printed or Typed Name

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| Practitioner(s) Name | Registration Number |
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☐ The address associated with the above-mentioned Customer Number.

OR

☒ The address associated with Customer Number: 021971

OR

☐ Firm or Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

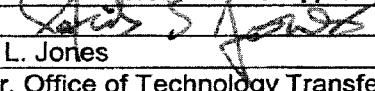
☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|---|-----------------------|--------------|
| Signature |  | Date | 4.22.10 |
| Name | Patrick L. Jones | Telephone | 520 621 5000 |
| Title and Company | Director, Office of Technology Transfer | University of Arizona | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.☒ *Total of 2 forms are submitted.

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: D. Lynn Kirkpatrick

Application No./Patent No.: 10/617,949 Filed/Issue Date: 7/10/03

Entitled: Asymmetric Disulfides and Methods of Using Same

Arizona Board of Regents on behalf of the
University of Arizona

, a body corporate of the state of Arizona

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest in;
2. ☐ an assignee of less than the entire right, title and interest in
(The extent (by percentage) of its ownership interest is ___%); or
3. ☐ the assignee of an undivided interest in the entirety of (a complete assignment from one of the joint inventors was made)

in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 018446, Frame 0474, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: _____ To: _____

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Reel __, Frame __, or for which a copy thereof is attached.

2. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel __, Frame __, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel __, Frame __, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet(s).

☐ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

Patrick L. Jones

Printed or Typed Name

Date

4.21.0

Director, Office of Technology Transfer

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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